

## 928 E North Ave Baltimore, MD 21202

Tel: 410-235-6633 Fax: 410-235-6636

Email to:

kbrooks@robertashouse.org

# **Volunteer Application**

PLEASE PRINT A	ND COMPLETE I	EACH ITE	M
Date of Application:			
Name as it appears on Driver's License	First	Middle	Last
Mailing Address: Street	City	State	Zip Code
Phone: Home ( ) Work ( )			ner: ( )
Email Address: B	irthdate:		Gender:
<b>High School Education</b>		College E	ducation
Name:	Name:		
Degree:	Degree/s: _		
Years Completed	Years Completed:		
_ · ·	ment Information	<u>ı</u>	
Occupation:			
Employer: 1)		Pho	ne: ()
2)		Phor	ne: ()
3)		Phor	ne: ()
Volum	teer Experience:		

## **Volunteer Activities**

Please check activities of interest to you.

$\mathbf{Ad}$	ministrative		<b>Assistant</b>		Other
0	Telephone Skills	0	Greeting Families	0	Children's Grief Facilitator
	_	0	Caring for	0	Maintenance Facility
0	Bulk Mailing		infants/toddlers	0	Gardening
0	Typing	0	Serving Meals	0	Health Fairs
0	PR	0	Playing with Children	0	Family Event Committee Member
0	Filing	0	Cleaning Up	0	Office/Mail-Outs
0	Data Entry			0	Monthly Kids/Family Events
0	Data Processing			0	Provide Entertainment
0	Fundraising			0	Auction item Solicitor
				0	Tapestry/Quilting
				0	Grant Wishes
				0	Computer Entry
				0	Special Events Asst.

#### Skills and Talents **Administrative Art/Crafts** Computer Artwork/Graphics Programming Playing an o Writing Instrument Training Photography o Conference Video Production Organization Quilting **Interviewing Skills** Singing/Dancing Fundraising Crafts (Specify) 0 **Public Speaking**

# Times Available for Volunteer Work Please fill in most convenient Time(s)

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Morning							
Afternoon							
Evening							

<b>Emergency Contact Person</b>					
Name:					
Relationship:					
Home #	Cell #				
Email:					

Personal References					
1) Name: P	hone#:				
Address:					
Years Known: Relationship:					
2) Name: P	hone#:				
Address:					
Years Known: Relationship:					
Have you participated in a support program at Roberta's House?  Yes No					
If yes, what program?					
How did you hear about Roberta's House?					
SIGNATURE	DATE:				

### **FOR OFFICE USE ONLY! Process Check Date Process Check Date** Start date for Volunteer Post interview \_\_\_\_ \_Mgr Initial Info entered in computer (w/initial) Job agreement signed Orientation completed Confidentiality Agreement Signed Pre-interview\_\_\_\_\_ Mgr. initials Training Evaluation & Facilitator Training complete Volunteer Task Assignment Code Background check complete